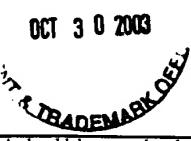
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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CONFIRMATION NO. FIRST NAMED INVENTOR APPLICATION NO. **FILING DATE** ATTORNEY DOCKET NO. 3577 Jonas Malmkvist 2867-0185-2 **PLT** 09/530,579 08/29/2000

TITLE OF INVENTION: RESOURCE OPTIMIZATION FUNCTION IN A DATA AND TELECOMMUNICATIONS SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FI	E PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$ 1300 1 3 3		\$0 \$0		HO00 1330	12/17/2003	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7			
WANG, LIANG CHE A		2155		709-231000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			OBLON, SPIVAK,		
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						2 McCLELLAND, MAIER		
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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Please check the appropriate assignee cat	egory or categories	(will not be printed on the patent);	individual	Corporation or other private group entity	☐ government		
4a. The following fee(s) are enclosed:		4b. Payment of Fee(s):					
X Issue Fee		☐ A check in the an	nount of the fee(s)	is enclosed.			
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